

# TRAINING APPLICATION

## Fire Fighter I, II, and I & II

**ELIGIBILITY:** Applicant must be a member of an organized Michigan fire department, 18 years of age or older (*if under 18 years, must be a Cadet or Explorer*), to attend Fire Fighter I, FF II, or FF I & II training administered by the MI Fire Fighters Training Council. (*Exception: Pre-service college students may attend this training at an MFFTC approved, college or university based Regional Training Center. This application does not apply to pre-service students.*)

**DIRECTIONS:** The applicant is to complete Sections I - III. The applicant's fire chief is to complete Section IV. BOTH the applicant and the fire chief must sign and date the application before submitting to the Course Manager. If a fee is being charged, payment must be arranged with the Course Manager. The applicant must bring a valid operators license with photo - OR - a picture ID and a certified copy of his or her birth certificate to the first scheduled class.

**APPLICATION DEADLINE:** This application must be received by the Course Manager on or before the second scheduled class date.

**AMERICANS WITH DISABILITIES ACT:** Individuals requesting accommodations under ADA to participate in MFFTC courses/exams should request the application forms from their Region Supervisor or visit the MFFTC web site at [www.mfftc.org](http://www.mfftc.org). The MFFTC is an equal opportunity institution.

### I. Applicant Information.

Please print or type

* Soc. Sec. No.	Drivers License No.	Date of Birth	Age
Last Name	First Name	MI	
No. and Street	County of Residence		
City	State	Zip Code	
Business Phone	Home Phone		
Emergency Contact Name	Phone Number		

### II. Fire Department Membership

Dept. Name	FDID
Dept. Phone No.	Date Employed by Dept. (Month/year)

### III. Training Requested

Please check one: ☐ FF I ☐ FF II \* ☐ FF I & II

\*FF II Prerequisite: Must attach copy of FF I certificate. Note: The testing law does not permit equivalences in place of FF I certification.

### IV. Completed by Fire Chief

The Fire Fighter identified in section I above: ( <i>Please check Yes or No for each statement</i> )	Yes	No
a. Is 18 years of age or older, a member of my fire department, and is covered by the department's worker compensation and liability insurance. ( <i>if under 18 years is a Cadet or Explorer</i> )		
b. To the best of my knowledge is physically capable of participating in the training and certification test.		
c. Will participate in the training and certification test using personal protective clothing and personal protective equipment including positive pressure SCBA meeting the Department of Consumer and Industry Services, Part 74 Fire Fighting safety standard.		

I understand that providing false information on this application will result in revocation of certification.	I understand that any injuries incurred by the applicant during training and testing are the responsibility of the fire department.
_____ Applicant's Signature	_____ Signature of Fire Chief or Designee
_____ Date	_____ Date

Original: Course Manager  
Copy: Applicant

\* This information is confidential. Disclosure of confidential information is protected by the Federal Privacy Act.

AUTHORITY: 1966 PA 291  
COMPLIANCE: Voluntary.